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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/SE98/01368 07/10/1998

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

SWEDEN 9702706-4 07/11/1997

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	DRAWING	CLAIMS	CLAIMS	
Verified and Acknowledged	Examiner's Signature <i>Z. F.</i>	Initials	20	2	

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## TITLE

PROSTAGLANDIN DERIVATIVES DEVOID OF SIDE-EFFECTS FOR THE TREATMENT OF GLAUCOMA

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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